# **DRAFT**



meeting minutes

# **Board of Directors Meeting**

facilitated by Brian Beutner, Chair

- > date: Wednesday, January 8, 2014
- building: 81 East 7<sup>th</sup> Street, St. Paul, MN
- > time: 1:00 4:00 p.m.
- > conference room: 1<sup>st</sup> floor atrium
- > board members in attendance: Thompson Aderinkomi, Pete Benner, Brian Beutner, Kathryn Duevel, Tom Forsythe, Commissioner Jesson, Phil Norrgard
- > staff in attendance: Scott Leitz, Carley Barber, Katie Burns, Barb Juelich, Erik Larson, Mike Turpin

# topics

## Welcome and any new business

Brian Beutner, Chair

The meeting was called to order at 1:07 p.m. by Brian Beutner, Chair.

Brian read the purpose of MNsure: The purpose of the organization is to ensure that every Minnesota resident and small business, regardless of health status, can easily find, choose, and purchase a health insurance product that they value and does not consume a disproportionate share of their income.

#### **Customer Story**

Miranda Posthumus, Robbinsdale

Miranda is a 27 year old graduate of Metro State University. She is an Account Manager with a large consulting firm. Over 15 years ago she was diagnosed with migraines. Prior to the Affordable Care Act (ACA), having this pre-existing condition has meant she needed to be covered on an employer's plan. Now that her pre-existing condition is not a factor and she is free to shop in the individual market, she looked into options through MNsure. She found many affordable plans with great coverage. The most impressive one she found was a platinum plan. When compared to her employer's plan, she found she would save \$2,500 in premiums and out of pocket costs. She made the decision to drop her







employer's coverage.

She had difficulty on the MNsure site using Internet Explorer but switched to Chrome and completed the application. The Carrier was not immediately able to confirm her coverage, but she was assured she was covered since she had paid.

Her former plan had a smaller network, higher out of pocket maximum, copays and 20% coinsurance. She now has a \$750 deductible, which is also the maximum out of pocket.

As a passionate supporter of the ACA, Miranda has been encouraging family and friends to check into MNsure and understand their options. Her referrals had difficulty with the site but she still supports the ACA and MNsure despite the flaws.

Miranda then took questions from the Board members.

- Q. How did you know to switch browsers and try Chrome?
- A. She already uses both and just tried it.
- Q. How big of a company do you work for?
- A. There are over 1,000 employees. The company is based on California so her health plan was national with a small network here.
- Q. What was your employer's response when you opted out of their plan?
- A. None. Open enrollment is done through a portal.
- Q. (After confirming Miranda did not have any tax credits) Did you consider purchasing the plan directly from the Carrier?
- A. No, but she did look at the Carrier's website.
- Q. What is your premium?
- A. It's a platinum plan plus dental and it is \$193/month. Her employer's plan would have been \$280/month.

# Approve December 30<sup>th</sup> meeting minutes

Brian Beutner, Chair

Commissioner Jesson moved to approve the <u>draft December 30<sup>th</sup> meeting minutes</u>. Phil Norrgard seconded. All were in favor and the minutes were approved.





#### **CEO** Report

Scott Leitz, Interim CEO

Scott Leitz acknowledged the hard work of the MNsure staff and that there are still challenges.

As he did at the last meeting, Scott also extended his gratitude for the collaboration of our partners and the patience and persistence of consumers.

#### **Enrollment Metrics**

Katie Burns, MNsure Policy and Plan Management Director, shared updated enrollment metrics.

Commissioner Jesson requested enrollment goals be added to the metrics as the other planned improvements to the metrics are implemented. Phil Norrgard requested the number of insurance cards issued by Carriers also be added.

Detail from the Carriers about what is happening in the "off-exchange" market was requested to understand if the plans have seen overall growth in the market in addition to enrollments within MNsure.

Clarification: the numbers for "MinnesotaCare Awaiting Invoice" do not include those auto-enrolled. They are all new applicants.

There are three reasons an application will pend.

- 1. Income verification -- If information a consumer submits is not compatible with what is available through federal electronic data sources, the consumer is required to provide additional verification information. This is the result of program integrity rules, not a system error.
- 2. Medical Assistance (MA) verification -- If a family member qualifies for MA and other family members are eligible for advanced premium tax credits, the tax credits are not being applied. This is not supposed to happen. Those consumers are able to proceed through the application and choose their plan and payment method, but at the full price. They are not being held up in the system, but we understand they may not want to do that and are therefore "self-pending." We've been contacting those households with "mixed status" to help them through the system. A software fix for this issue is also being worked on.
- 3. MNsure actions -- The staff is intentionally pending applications as part of the clean-up process for those who had problems in the system.

The payment deadline is "close of business" on January 10<sup>th</sup>. This means:

- If paying the Carrier directly, it has to arrive in the mail on the 10<sup>th</sup> or be delivered, in person, by the close of the Carrier's business.
- If mailed to MNsure, it must be received by January 10<sup>th</sup>.
- If delivered in person to the Receipt Center, it must be delivered before 6 p.m. CST.





Electronic payment can be made through the MNsure system by 5 p.m. CST.

This clarification will be communicated on the MNsure website.

Enrollment files are being sent to the Carriers twice a week.

The enrollment deadline for coverage effective February 1st is January 15th.

Scott talked about the preparations being made and contingency plans being put in place in anticipation of the March 31<sup>st</sup> open enrollment deadline. We want people using the system but, as a fall back plan, paper applications will be an option for those who are unable to due to system issues. The manual processes have been established. We will be staffed appropriately to handle the processing. We can outline a message for consumers explaining what to do if they experience problems.

#### **Navigators and Brokers**

We need to focus on getting the base functionality more stabilized before working on desired functionality such as the Navigator/Broker portal. However, we need to work on being more engaged with the Navigators and Brokers.

We have not yet made payment to the Navigators and Brokers. This is a large query and reconciliation effort and we are exploring how we can best balance internal resource needs to ensure that happens quickly and accurately. The Board noted the great work being done by Navigators and Brokers and that the payments are significant to many of these organizations, and directed staff to accelerate this process.

#### Call Center

Erik Larson provided an update on the call center. He acknowledged there are a lot of people doing a lot of hard work in the call center. He thanked the call center staff and management for doing an outstanding job of adapting and reacting. He noted that the primary cause of long call center wait times and lengthy calls was the core IT issues. Call times are starting to going down. They have been under an hour. Call volume has not gone down. We receive a large number of calls confirming coverage, which will slow down as insurance cards are received in the mail. He discussed actions being taken immediately to make improvements including moving to a single shift, and adding staff.

Twelve call center staff have been hired and will be taking calls by early February. In addition he is looking at an outsource vendor to assist with a percentage of calls. Tom Forsythe wants to understand the budget impacts of doing what we need to do, but stressed that the cost is well worth it to improve the consumer experience and reduce unacceptable call wait times..

#### Office of the Legislative Auditor

Scott noted that the Legislative Auditor Jim Nobles announced he would be conducting audit activities





and the opening conference between MNsure and Office of the Legislative Auditor (OLA) took place yesterday. The OLA has a great deal of interest in ensuring we are using tax dollars wisely. This audit activity is starting as we enter the second half of open enrollment. We are working together to ensure the OLA meets its requirements of oversight as we meet ours with open enrollment.

Barb Juelich explained that every agency receiving federal funds goes through an audit. This audit will go back to fiscal year 2012 and through the first six months of fiscal year 2014, primarily to ensure all expenditures are allowable under the federal grants and compliant with the federal grant activities.

Additionally, under federal regulations, State Based Marketplaces are required to have an independent auditor review the books annually. This serves that purpose as well so there is no need for duplication of services. OLA staff may be on site starting in a couple weeks. As for the length of the audit, the expectation is that it will go into spring but it depends on the findings.

This will require time from staff. As these audits are statutory and federal requirements, we've planned for them and a staff member on Mike Turpin's staff will serve as liaison to the auditors. The Department of Commerce was our fiscal agent during fiscal year 2013 so they will be involved and will likely have a lot of the documentation.

# **Public Comment**

None

#### Items for Board discussion

Brian Beutner, Chair

Scott provided an update on the plan for an end to end systems review, which was requested at the last Board meeting. Our system is modular, made up of different components, which have to interact. MNsure has engaged Optum to conduct the review. Optum has done similar work for the Maryland exchange (which uses many of the same components and vendors that MNsure does). Optum is also assisting the Oregon and Massachusetts exchanges as well as the federal site. They started today with approximately 15 people on site. The end to end review will include MN.IT and MNsure staff as well. They will be looking at the IT system, providing an additional read on the call center, the data aspects / the ability to get data out of the system as well as the project structure and opportunities for improvement. Findings are expected in a week or two. Optum is providing this initial assessment free of charge to MNsure. The Board would like the information as soon as it is available. A formal Board report will be provided at the January 22<sup>nd</sup> meeting.

Scott then discussed some actions he plans to address the unique interagency inter-dependencies we have. MNsure will hire an overall project manager to work across agencies and add discipline to communication and decision-making. There is also a need for vendor oversight and we expect





recommendations to come out of the end to end review to possibly add staff in this area as well.

Additional meetings were added and a <u>revised meeting schedule</u> was provided. Carley Barber will circulate a list of topics with the Board members and capture their ideas for agenda items.

The Board discussed timing for the national search for a permanent CEO. It was the consensus of the Board that all efforts should be focused on MNsure's operational issues at this time to revisit the search process at the future meetings.

## Wrap up and new business

Phil Norrgard asked for more information from MNsure in addition to the oral reports from the CEO and staff provided in the meetings. Written information provided in advance of the meeting would be helpful, as Board members asked a lot of questions by people who look to them for information. Perhaps a monthly dashboard, sent in advance of the Board meeting, that can also be used to prepare for discussion of agenda items.

Phil Norrgard moved to adjourn. There were no objections and the meeting adjourned at 3:50 p.m.